



5th Annual "Cherish the Children"
The Ultimate Fantasy Auction
In support of the Michigan Children's Trust Fund
May 1, 2007



Ticket Purchase Form

Please fax this form to (517) 241-7038 or mail to the address below.

Name: _____

Title: _____

E-mail address (required): _____

(You will receive an e-confirmation for the event)

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Ticket Sold By: _____

☐ I wish to purchase _____ ticket(s) to the event at \$100 per ticket.

☐ I have enclosed a check in the amount of \$_____ for _____ ticket(s).

☐ Please charge my credit card in the amount of \$_____ for _____ ticket(s).

Please check: ☐ Visa ☐ Mastercard ☐ American Express

Card # _____ Exp. Date _____

Card Holder's Signature _____

(Please note: \$85 of each ticket is tax deductible)

Please return this form and payment to: **Children's Trust Fund**
P.O. Box 30037
Lansing, MI 48909
or
Fax: (517) 241-7038

For further information, call 1-800-CHILDREN
or visit our website at: www.michigan.gov/ctf

Please return this form to CTF by April 13, 2007